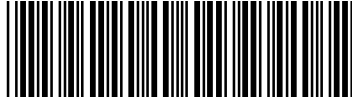


|  |  |  |
|--|--|--|
| <b><i>Index of Claims</i></b><br><br> | <b>Application/Control No.</b><br><br>10564116 | <b>Applicant(s)/Patent Under Reexamination</b><br><br>TAKAHASHI ET AL. |
|  | <b>Examiner</b><br><br>MIRIAM BERDICHEVSKY     | <b>Art Unit</b><br><br>1795  |

|   |                 |   |                   |   |                     |   |                 |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | <b>Rejected</b> | - | <b>Cancelled</b>  | N | <b>Non-Elected</b>  | A | <b>Appeal</b>   |
| = | <b>Allowed</b>  | ÷ | <b>Restricted</b> | I | <b>Interference</b> | O | <b>Objected</b> |

| <input checked="" type="checkbox"/> <b>Claims renumbered in the same order as presented by applicant</b> <input type="checkbox"/> CPA <input type="checkbox"/> T.D. <input type="checkbox"/> R.1.47 |          |            |  |  |  |  |  |  |  |  |
|---|----------|------------|--|--|--|--|--|--|--|--|
| CLAIM   |          | DATE       |  |  |  |  |  |  |  |  |
| Final   | Original | 04/30/2009 |  |  |  |  |  |  |  |  |
|   | 1        | =          |  |  |  |  |  |  |  |  |
|   | 2        | =          |  |  |  |  |  |  |  |  |
|   | 3        | =          |  |  |  |  |  |  |  |  |
|   | 4        | =          |  |  |  |  |  |  |  |  |
|   | 5        | =          |  |  |  |  |  |  |  |  |
|   | 6        | =          |  |  |  |  |  |  |  |  |
|   | 7        | =          |  |  |  |  |  |  |  |  |
|   | 8        | =          |  |  |  |  |  |  |  |  |
|   | 9        | =          |  |  |  |  |  |  |  |  |
|   | 10       | =          |  |  |  |  |  |  |  |  |
|   | 11       | =          |  |  |  |  |  |  |  |  |
|   | 12       | =          |  |  |  |  |  |  |  |  |
|   | 13       | =          |  |  |  |  |  |  |  |  |
|   | 14       | =          |  |  |  |  |  |  |  |  |
|   | 15       | =          |  |  |  |  |  |  |  |  |
|   | 16       | =          |  |  |  |  |  |  |  |  |
|   | 17       | =          |  |  |  |  |  |  |  |  |
|   | 18       | =          |  |  |  |  |  |  |  |  |
|   | 19       | =          |  |  |  |  |  |  |  |  |
|   | 20       | =          |  |  |  |  |  |  |  |  |